

USA

DECLARATION AND POWER OF ATTORNEY

As a below-named inventor, I hereby declare that my residence, post office address and citizenship are as stated below next to my name; I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of subject matter which is claimed and for which a patent is sought on an invention entitled

MAGNETIC PARTICLES FOR THERAPEUTIC TREATMENT

the specification of which was filed National Phase on January 18, 2006 as U.S. Patent Application Serial Number 10/565,533 claiming priority to the specification of which is attached hereto or

was filed on 16 JUL 04 as United States Application Number or PCT International Application Number PCT/GB04/03117 and was amended on (if applicable)

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment referred to above. I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56. I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for a patent or inventor's certificate, or PCT international application having a filing date before that of the application on which priority is claimed:

| Prior Foreign Application Number(s) | Country | Foreign Filing Date | Priority Not Claimed | Certified Copy Attached? |
|-------------------------------------|---------|---------------------|--------------------------|--|
| | | | YES | NO |
| 0316912.5 | GB | 18 JUL 03 | <input type="checkbox"/> | <input type="checkbox"/> <input checked="" type="checkbox"/> |
| | | | <input type="checkbox"/> | <input type="checkbox"/> <input checked="" type="checkbox"/> |
| | | | <input type="checkbox"/> | <input type="checkbox"/> <input checked="" type="checkbox"/> |

As a named inventor, I hereby appoint the following registered practitioner(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith:

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I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C 1001 and that such willful false statements may jeopardise the validity of the application or any patent issued thereon.

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